Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

09/670864

_												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
FC	DR —	NUMB	ER FILED		NUMBER EXTRA			RATE	FEE	1 1	RATE	FEE
BASIC FEE						*			345.00	OR		690.00
TOTAL CLAIMS 32 mir			minus	20=	· }2]	X\$ 9=		OR	X\$18=	216.00
INDEPENDENT CLAIMS 4 minus							l	X39=		OR	X78=	78.00
MULTIPLE DEPENDENT CLAIM PRESENT							1 1	100		1	.000	10.00
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=		OR	+260=	· ·
CLAIMS AS AMENDED - PART II								TOTAL.		OR	TOTAL	984.00
	(Column 1) (Column 2) (Column 3)							SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT A	1	CLAIMS REMAINING		4	HIGHEST		1 [ADDI-	1 1		· ADDI-
		AFTER AMENDMENT		PR	IUMBER EVIOUSLY AID FOR	PRESENT		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		.=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+130=		1 1	+260=	
·										OR		
*							٨	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
		(Column 1)			olumn 2)	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1 t	X39=		lì	X78=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							700=		OR	770-	
,								+130=		OR	+260=	
							A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			olumn 2)	(Column 3)	_					
AMENDMENT C	-	CLAIMS REMAINING AFTER AMENDMENT		PRI	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	<u> </u>
	Independent	*	Minus	***		= ·	1 F				_	
٧	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDI	ENT CLAIM		 	X39≐		OR	X78=	
* If the entry in column 1 is lose than the entry in column 2 write "0" in column 2										OR	+260= `	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												е
-	The "Highest Num	ber Previously Pa	id For" (Total o	r Indep	endent) is the	highest numbe	er four	nd in the app	ropriate box	c in col	umn 1.	•